

Transmittal Cover Sheet For National Registry Examination Materials

Note: *This cover sheet **MUST** be used when transmitting examination materials to the National Registry, failure to utilize this form will result in your materials being sent to the Montana Board of Medical Examiners and then returned to you. Causing a very significant delay!*

Enclosed are _____ applications and attachments.
insert number of enclosed applications

Each application **MUST HAVE**, paper clipped (not stapled) the following;

1. Completed application (all required signatures, front and back)
2. The application must be signed on front confirming successful completion of practical exam,
3. Copy of a certificate of course completion,
4. Copy of current CPR card,
5. Completed written answer sheet, and
6. Fee (money order).

If any application is not complete (*as identified above*), **DO NOT** send to National Registry, wait and send only complete applications.

If there are any questions concerning the enclosed applications, please contact me concerning the materials.

***** **PLEASE PRINT** *****

Name: _____
First Last

Address: _____, Montana _____
Street Address Zip

Phone Number (8am – 3pm MST): _(406) - _____ - _____

Mail to:
NATIONAL REGISTRY OF EMT'S
ROCCO V. MORANDO BLD, 6610 BUSH BLVD
P.O. BOX 29233
COLUMBUS, OHIO 43229